PATÉNT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003									Application or Docket Number 10/179438						
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY				
TOTAL CLAIMS			24					RATE F		FEE	1	RATE	FEE		
FOR			NUMBER FILED .		NUMBER EXTRA			BASIC FEE 385.00		385.00	OR	BASIC FEE	770.00		
TOTAL CHARGEABLE CLAIMS			Dry minus 20=		• 7			X\$ 9=			OR	X\$18≃	10		
INDEPENDENT CLAIMS			7_minus 3 =					X43=			OR	X86=			
ML	ALTIPLE DEPE	NDENT CLÂIM P	RESENT								OR	+290=			
• 11	the difference	in column 1 is	ess than zero, enter "0" in column 2				TOTAL			OR	TOTAL	442			
7.36 OF CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									- 1		, 0	OTHER	THAN		
								SMAL	L E	NTITY	OR	SMALL			
AMENDMENT A.		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	· £4	Minus	* 0	24			X\$ 9=			OR	X\$18=			
	Independent	. 2	Minus	•••	3	=		X43=	7		OR	X86=	·		
	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT	CLAIM			. 145	1			+290 =			
							Į	+145=			OR	TOTAL			
			•		-		1	ADDIT. FE			OR ,	ADDIT. FEE			
		(Column 1) CLAIMS	· · · · ·	(Colun		(Column 3)	1 6		_				455		
AMENDMENT B	abslow	REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ŀ	ADDI- TIONAL FEE		PATE	ADDI- TIONAL FEE		
	Total	.23	Minus	- &	24	- /		X\$ 9=			OR	X\$18=			
	Independent	NTATION OF MU	Minus	ENDENT		• /		X43=			OR	X86=	ŀ		
لبا				C.10C.111		· ;	'	+145=			OR	+290=			
						_	_	TOTA			OR ,	TOTAL ODIT. FEE			
	_ - -				•	·		7							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA	ſ	RATE	•	ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE		
∑	Total	•	Minus	•••		9		X\$ 9=	1		OR	X\$18=			
E E	Independent	•	Minus	***	-	œ .	╽┞	X43=	+			X86=			
<u> </u>	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM		 -	~~~=	+		OR	V003			
	the enter in an		+145=			OR	+290=								
	the "Highest Nur the "Highest Nur	nn 1 is less than the niber Previously Pai niber Previously Pai	d For IN THIS Id For IN THIS	S SPACE 6 S SPACE 6	less that	n 20, enter "20." n 3. enter "3."	~	TOTAL DOIT, FEE	٤L			TOTAL DOIT. FEE			
	ine unfluenza worus	ber Previously Paid	ror (lotal or	nnebeuger	क्षेत्र क्षा क्ष	uiðusa únupa	roun	nd in the a	ppr	oprate box	u cop	ins 1.			